

**APPLICATION FOR  
PROPERTY RESALE COMPLIANCE INSPECTION**

**Inspection Address:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Owner/Seller Information:**

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address (if different): \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Forwarding Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Real Estate Company: \_\_\_\_\_ Phone # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Agent Name: \_\_\_\_\_ FAX # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Attorney Name: \_\_\_\_\_ Phone # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Attorney Firm: \_\_\_\_\_ FAX # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Attorney Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip \_\_\_\_\_

**Buyer Information:**

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Current Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Realtor: \_\_\_\_\_ Phone # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Attorney Name: \_\_\_\_\_ Phone # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Attorney Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip \_\_\_\_\_

**CLOSING DATE:** \_\_\_\_\_

**INSPECTION DATE:** \_\_\_\_\_ **TIME:** \_\_\_\_\_

(Note: Please allow sufficient time to make any corrections to the house after the inspection and before closing. Resale Inspections are valid for 60 days after the initial inspection.)

**FEE:** The charge for a residential Resale Inspection is \$100.00, which must be paid prior to the actual inspection. Fees for Apartment buildings and Commercial buildings are extra depending on size.

**Note:** One Re-Inspection is allowed. Additional Re-Inspections will be charged at \$100.00 each.

Application by: \_\_\_\_\_ Signature: \_\_\_\_\_